FOR INSTRUCTIONS, SEE BACK OF FORM

Johnson

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees

IA ETHICS AND for state office must be filed electronically and effective January 1, 2012, all CAMPAIGN DISCLOSURE BD. electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2011 OCT -5 AM 10: 16

	Reset F	orm o	10/4/200
COMMITTEE NAME (Must be same as on Statement of Organ	ization)	== K	leceived 10/4/2011 -
McCallum For Council	,		FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate (8) County PAC (9) City PAC (10) School Bo	State PAC (3)State Party	cal E	DR-2 Rev. 12/2009) DISCLOSURE REPORT OF Office Use Only
CANDIDATE COMMITTEES ONLY:			amm.# 13870
Candidate Name	Political Party (if applicable)		pgged in
MARK Mc Callum	100 Print		omputer
Office Sought CITY Council	District (if Senate or House)		udited
ate reports are subject to possible civil and criminal penalties. Pursuandidate's committee, and the chairperson, for any other type of con	nmittee, is the individual responsib	A(7) and 68/	A.401(3), the candidate, for a mely and accurate reports.
BIGNATURE OF PERSON FILING REPORT	319-430-1461	10	
NORTH OF FERSON FILING REPORT	TELEPHONE		DATE SIGNED
AM FILING A 10/6/2011	REPORT FOR (4) ELECTIO	N #2\NON	ELECTION VEAD
(report date)	Indicate by		ELECTION YEAR,
CHECK IF AMENDMENT TO REPORT DATED	=		
		1 .	mittees, enter Date of Election
☐ Check if this is final (termination) report and attach Notice of E (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.		
STATEMENT OF CASH ON HAND		L-X-X	
ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the cas of the last reporting period or must be zero if this is first	h on hand at the end	s	185.75
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		290.00
Schedule F: Loans Received total (Attach Schedule F)			500.00
Schedule H: Total Sales of Campaign Property (Attach			
(Schedule H applies to Candidates' Commit			
	SUB-TOTAL	s	975.75
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		***************************************	
Schedule B: Expenditures total (Attach Schedule B) (**a	also see debts and loans below)		178.24
Schedule F: Loan Repayments total (Attach Schedule F			.00
ASH ON HAND at the end of this reporting period (if final report			197.51
UNPAID BILLS (From Schedule D - Attach Schedule D)			.00
N KIND CONTRIBUTIONS (From Schedule E - Attach Schedule			.00
OUTSTANDING LOANS (From Schedule F - Attach Schedule F			1500.00
ONSULTANT BREAKDOWN (Schedule G Attached?)	J. CASTLANT S. C.	· · · · · · · · · · · · · · · · · · ·	
ANDIDATE COMMITTEES ONLY:		•	YES NO
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	\$.00
FATE COMMITTEES: Submit a reconciled campaign account b	ank statement in January of and	b	

For	Instructions.	See	Rack	of Form
, 0:	mounderens.	~~~	Dack	OI FOIIII

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

			,
COMMITTEE	NAME (Mus	t be same	as on Statement of Organization)
			COUNCIL

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B 32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/18/11	CK# 178/	Thomas / CARDI ROSOM GERGER 503 STUBER OT , JOWA E114, JA 52245		\$ 40.00	I I
9/20/11	CK# 74 69	Jeffry T. SCHABILIONS 431 Rundell St. IOWA City, IA 52248		25.00	
9/22/0	ID# CK# 3066	LEAH COHEN 1638 TEG DRIVE, IOMA CITY, IA	,,,,,,,,	100.00	
][2.5][]	CK# 3377	Gevald Meis 62 White ORL PINCE JOWN CITY, IR 52245		25.00	
7/26/11	ID# CK# 13 582	LOU ANN OR DENNIS hathrop 715 Kennedy Parkway, Joun City, JA		100.00	
	CK#				
	ID# CK#				
			SUB-TOTAL	-290 00	

TOTAL (if last page of this schedule)

Page _____ of _____

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
L	CK THIS BOX IF

~~~		44. (1)
COMMITTEE	NAME	(Must be same as on Statement of Organization)

Mª CAllum For Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/0/11	ID# CK#	MIDWEST ONE BANK	INACTIVE SERVICE CHARGE	\$ 5.06
1/3/10	ID#	STATE OF TOWA	SAIES TAX	. 35
2/28/1,	ID# CK#	MID WEST ONE BANK	INACTIVE SERVICE CHARGE	5.00
2/28/11	ID# CK#	STATE OF TOWN	SAIES TAK	.35
3/31/0	ID# CK#	MIDWESTONE BANK	INACTIVE SERVICE CHARGE	5.00
3/3//11	ID# CK#	STATE OF IOWA	SAIES TAX	. 35
4/29/11	ID# CK#	MIDWEST ONE BANK	INACTIVE SERVICE CHARGE	5.00
4/29/11	ID# CK#	STATE OF JOWA	SAIES TAX	. 35
			SUBITOTAL	T a

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 21.40

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Reset Form

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHED B (Rev. 0	 MONETARY EXPENDITURES
	 CK THIS BOX IF

CO	MMITTEE	NAME	(Must be	same	as on	Statement	of Organization
U	MMILIEE	NAME	(Must be	same	as on	Statement	of Organization

Mc Cailum Fore Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/3/11	ID# CK#	MIDWEST ONE BANK	INACTIVE SERVICE CHARGE	\$ 5.00
5/3//11	ID# CK#	STATE OF IOWA	SAIES TRX	. 35
6/30/1,	ID# CK#	MID WEST ONE BANK	INACTIVE SERVICE CHARGE	5.00
6/38/11	ID# CK#	STATE OF IOWA	SALES TAX	. 35
1/29/11	ID# CK#∄₽Э₹	MIDWEST ONE BANK	INACTIVE SERVICE CHARGE	5,00
7/29/11	ID# CK#	STATE OF TULA	SALES TAX	.35
3/31/11	ID# CK#	MIDWEST ONE BANK	INACTIVE SERVICE CHARGE	5, 80
3/31/11	ID# CK#	STATE OF TOWA	SALES TAX	. 35

21.40

TOTAL (if last page of this schedule)

42.80

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Reset Form

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be	same as on	Statement of	Organization)
M° CAllum	FOR	Counci	1	o.gomeanory

	01110	COWING		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01	ID#			
9/15/17	CK# 1004	Postmaster	Mailing	\$ 88.00
	ID#			
1/15/11	CK# 1605	Office Depot	Ma, ling	26.48
	ID#			
9/28/11	CK# 1006	Stafie 5	CLIPBOAR DS/PENS "VOTER REGISTRATION"	33.03
9/29/11	ID#	Johnson County Auditor		
	CK# 1007	JOHNSON YOURTY HEATTON	Votee hosts	25.38
	ID#			
9/36/11	CK#	MIO WEST ONE	INACTIVE SERVICE CHARGE	5.06
	ID#			
1/30/4	CK#	STATE OF JOUR	SAIES TAY	.35
	ID#			
-	СК#			
****	ID#			
b.	CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 178.24

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	3	af	3
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OR INSTRUCTION	IS, SEE BACK OF FORM	RESET	SCHEDULE
OMMITTEE NAMI	E(Must be same as on Statement of Organization)		F LOANS
Me Callur	n For Council		(Rev. 02/08) RECEIVED
	le reports money loaned to the committee which is deposited in t	the committee account.	CHECK THIS BOX
	ANS FROM <u>LAST</u> REPORTING PERIOD \$		
ARTI - MONETAI (Original s	RY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD tource of loan, such as a bank, must be shown if a third party is it	involved. Include loans from ca	ndidate's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applica	
9/14/11	MARK Mª CAHUR. 932 E. College, Steet, IOWA City, IsasA 51240	CANDIDATE	500.00
		TOTAL (PART I)	s 500.00
ART II - MONET, (Loans fo	ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD rgiven must be reported on Schedule E In-kind Contributions.)		
(MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applica	AMOUNT REPAID ble)
			\$
	TOTAL CASH I	REPAYMENTS (PART II)	s 00.00
	From Schedule E TOTA	AL LOANS FORGIVEN	s 00.60
Na. 4	TOTAL OUTSTANDING LOANS EN		s 500.00
onsanguinity (bloo	uires candidate committees to disclose the relationship of any re on to the committee. Relationship must be shown to the third dea d relatives) and affinity (relatives by marriage). If surname of col ate, but there is no familial relationship, enter "not applicable" in when it applies	gree of	(for Schedule F)